Case 11-33014-DHS Doc 456 Filed 12/12/11 Entered 12/12/11 21:11:55 Desc Main

# Document Page 1 of 10 UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY

Explanation

Attached

In re	Hudson Healthcare Inc
	Debtor

Case No. 11-33014(DHS)

**Reporting Period** 10/1 -10/31/2011

Document

Attached

Yes

Yes

Yes

Form No.

MOR-1 (CONT)

MOR-1

#### MONTHLY OPERATING REPORT

File with Court and submit to United States Trustee within 20 days after end of month

Submit copy of report to any official committee appointed in the case.

Bank Reconciliation (or copies of debtor's bank reconciliation's)

REQUIRED DOCUMENTS

Copies of bank statements

Vincent Riccitelli

Printed Name of Authorized Individual

Schedule of Cash Receipts and Disbursements

Cash disbursements journals		Yes
Statement of Operations	MOR-2	Yes
Balance Sheet	MOR-3	Yes
Status of Postpetition Taxes	MOR-4	Yes
Copies of IRS Form 6123 or payment receipt		Yes
Copies of tax returns filed during reporting period		Yes
Summary of Unpaid Postpetition Debts	MOR-4	Yes
Listing of aged accounts payable		Yes
Accounts Receivable reconciliation and Aging	MOR-5	
	MOR-5	Yes
Debtor Questionnaire  I declare under penalty of perjury (28 U.S.C. Section 1746) that thi are true and correct to the best of my knowledge and belief.	s report and the documents attached	
I declare under penalty of perjury (28 U.S.C. Section 1746) that thi		ate
I declare under penalty of perjury (28 U.S.C. Section 1746) that thi are true and correct to the best of my knowledge and belief.		ate
I declare under penalty of perjury (28 U.S.C. Section 1746) that thi are true and correct to the best of my knowledge and belief.	D	ate
I declare under penalty of perjury (28 U.S.C. Section 1746) that thi are true and correct to the best of my knowledge and belief.  Signature of Debtor	D	

Title of Authorized Individual

<sup>\*</sup>Authorized individual must be an officer, director or shareholder if debtor is a corporation; is a partnership; a manager of member if debtor is a limited liability company.

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Case No.

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#### SCHEDULE OF CASH RECEIPTS AND DISBURSEMENTS

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be ending cash from the prior month or if this is the first report, the amount should be the balance on the date the petition was filed. The amounts reported in the "CURRENT MONTH - ACTUAL" column must equal the sum of the four bank account columns. The amounts reported in the "PROJECTED" columns should be taken from the SMALL BUSINESS INITIAL REPORT (FORM (R-1). Attach copies of the bank statements and the cash disbursements journal. The total disbursements listed in the disbursements journal journal must equal the total disbursements reported on the page. A bank reconciliation must be attached for each account. [See MOR-! (CONT)]

In re Hudson Healthcare Inc

Debtor

			BANKACCO	UNTS			CURREN	I MONTH	CUMULATIVE FI	LING TO DATE
		Pavroll	Forundation ID Bank	Foundation Capital Once	Equindation Capital Once	FAITH (Commerce)	ACTUAL	PROJECTED	ACTUAL	PROJECTED
	Operating	Payron	даж	(Checking)						
CASH BEGINNING OF MONTH *	(24,889)		44,303	55,977	79,366	38,109	192,867		192,867	
RECEIPTS										
CASH SALES							-		-	-
ACCOUNTS RECEIVABLE									-	-
LOANS AND ADVANCES							-		-	
SALES OF ASSETS							-		-	-
	80		3				83		401	<u>-</u>
INTEREST INCOME	8,526,667			3,719	-	64_	8,530,450		29,943,089	
OTHER (ATTACH LIST)	61,734						61,734		61,734	-
TRANSFERS FROM FOUNDATION TOTAL RECEIPTS (See Attached)	8,588,481	-	3	3,719		64	8,592,268	-	30,005,224	
NET PAYROLL		3,614,170					3,614,170		12,209,187	
PAYROLL TAXES	2,074,612						2,074,612		5,038,986	
SALES, USE & OTHER TAXES	1,732						1,732		50,681	<u> </u>
INVENTORY PURCHASES	636,934						636,934		2,901,620	
SECURED RENTAL LEASES	178,764						178,764		640,645	
	51,860						51,860		829,756	-
INSURANCE	61,532						61,532		254,642	
ADMINISTRATIVE	01,552								-	
SELLING	1,928,282		1,032	257			1,929,571		7,458,502	
OTHER (ATTACH LIST) #1	1,928,282									-
							-		-	
SECURED DEBT PAYMENTS			40,000	21,734			61,734		61,734	-
TRANSFERS TO FOUNDATION		(2 (14 170)		21,751			(120,003)		(120,003)	-
TRANSFERS (TO PR BANK ACCT)	3,494,167	(3,614,170)					-			_
PROFESSIONAL FEES	-						_			-
US TRUSTEE QUARTERLY FEES			-				_		-	-
COURT COSTS		<del>                                     </del>		21 222			8,490,907	-	29,325,750	-
TOTAL DISBURSEMENTS (See Attached)	8,427,884		41,032	21,992	00000000000	<u> </u>	77.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	<u> </u>		
NET CASH FLOW	160,598	_	(41,029)	(18,272)		64	101,361		679,475	- 100 (100 (100 (100 (100 (100 (100 (100
(RECEIPTS LESS DISBURSEMENTS)									872,341	:-:-:-:-:-:
CASH END OF MONTH	135,709		3,275	37,704	79,366	38,173	294,227		F:1 8/2,341	

THE FOLLOWING SECTION MUST BE COMPLETED	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	
DISBURSEMENTS FOR CALCULATING U.S. TRUSTEES QUARTERLY FEES (FROM CURRENT MONTHS ACTUAL COLUMN)		
TOTAL DISBURSEMENTS	-	\$ 8,490,907 61,734
LESS TRANSFERS TO DEBTOR IN POSSESSION ACCOUNTS		\$ 8.429.173
Total disbursements for calculating u.s. trustee quarterly fees		 0,425,175

MOR Form 1 Schedule A includes all disbursements and includes a column for "other" for \$2,708,880

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In re Hudson Healthcare Inc

Case No. 11-33014(DHS) 10/1 -10/31/2011 Reporting Period:

## SCHEDULE OF CASH RECEIPTS AND DISBURSEMENTS - continuation sheet

BREAKDOWN OF "OTHER CATEGORY"	CURRENT MONTH ACTUAL	CUMULATIVE FILING TO DATE
OTHER RECEIPTS		
1 Transfer from Authority	8,526,667	29,926,667
2 Unrestricted Donation Foundation	-	2,300
3 Child Birth Education Class Income	3,719	12,673
4 FAITH Interest & Misc. Deposit	64	343
5 Return of Direct Deposit		1,106
6		
Total Other Receipts	8,530,450	29,943,089
OTHER DISBURSEMENTS  1 Please see file FORM MOR-1 Schedule for Disbursement A - see "other"	1,928,282	7,448,846
2 Foundation Misc. Event exps	1,032	8,645
3 Foundation Capital One bank fees & Misc event exps.	257	1,010
	457	
		1

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	Debtor				
				Reporting Period:	10/1 -10/31/2011

#### **BANK RECONCILIATIONS - SEE ATTACHED**

Continuation Sheet for MOR-1

A bank reconciliation must be included for each bank account. The debtor's bank reconciliation may be substituted for this page.

Bank Reconciliations Attached	See Form MO See Mor 1 Bn	r-1 Bank Rec_ k Stmnts	_Cash Disbrs	mnt				
		rating	Pa	yroll		Other Foundation TD Bank		her Capital One cking)
BALANCE PER BOOKS								
BANK BALANCE								
(+) DEPOSITS IN TRANSIT (ATTACH LIST)	_						-	
(-) OUTSTANDING CHECKS (ATTACH LIST)					<u>-</u>		-	
OTHER (ATTACHED EXPLANATION) ADJUSTED BANK BALANCE *								
* Adjusted bank balance must equal	<u> </u>	<del></del>		<u></u>				
balance per books								
DEPOSITS IN TRANSIT	Date	Amount	Date	Amount	Date	Amount	Date	Amount
CHECKS OUTSTANDING	Ck. #	Amount	Ck. #	Amount	Ck. #	Amount	Ck. #	Amount
ı								
		ļ						
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In re Hudson Healthcare Inc

Case No.
Reporting Period:

11-33014(DHS) 10/1 -10/31/2011

#### STATEMENT OF OPERATIONS

(Income Statement)

The Statement of Operations is to be prepared on an accrual basis. The accrual basis of accounting recognizes revenue when it is

realized and expenses when they are incurred, regardless of when case is actually received or paid CUMULATIVE Month FILING TO DATE REVENUES 32,148,759 10,221,920 \$ Gross Revenue Less: Returns and Allowances \$ 32,148,759 10,221,920 Net Revenue COST OF GOODS SOLD \$ Beginning Inventory \$ Add: Purchases \$ Add: Cost of Labor \$ \$ \_ Add: Other Costs (attach schedule) \$ Less: Ending Inventory \$ Cost of Goods Sold 32,148,759 10,221,920 \$ \$ Gross Profit OPERATING EXPENSES 17,868 \$ Advertising \$ Auto and Truck Expense \$ Bad Debts Contributions 2,633,796 \$ Employee Benefits Program 1,062,759 \$ Insider Compensation\* 380,815 119,663 Insurance \$ Management Fees/Bonuses 49,098 \$ Office Expense 17,837 581,238 \$ 180,312 | \$ Pension & Profit-Sharing Plans 509,060 187,305 \$ \$ Repairs and Maintenance 921,671 \$ 290,919 \$ Rent and Lease Expense 4,466,235 14,736,659 \$ \$ Salaries/Commissions/Fees \$ 1,178,883 3,541,008 Supplies 1,214,273 \$ 394,555 \$ Taxes - Payroll Taxes - Real Estate Taxes - Other 4,309 \$ 2,457 \$ Travel and Entertainment 182,022 \$ 631,160 \$ Utilities 5,847,663 1,888,048 \$ SEE \$ Other (attach schedule) 31,068,618 9,970,995 \$ Total Operating Expenses Before Depreciation \$ \$ Depreciation/Depletion/Amortization 250,925 1,080,141 \$ Net Profit (Loss) Before Other Income & Expense OTHER INCOME AND EXPENSES 2,452 80 \$ \$ Other Income (attach schedule) \$ Interest Expense 5,519 \$ 20,466 Other Expenses (attach schedule) \$ 245,486 \$ 1,062,127 \$ Net Profit (Loss) Before Reorganization Items REORGANIZATION ITEMS 250,926 \$ 1,083,942 \$ Professional Fees \$ U.S. Trustee Quarterly Fees \$ Interest Earned on Accumulated Cash from Chapter 11 (see continuation sheet) \$ Gain (Loss) from Sale of Equipment \$ Other Reorganization Expenses (attach schedule) 1,083,942 250,926 \$ \$ Total Reorganization Expenses Income Taxes (5,440) \$ (21,815)\$ Net Profits (Loss)

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Case No. Reporting Period:

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#### STATEMENT OF OPERATIONS - continuation sheet

(Income Statement)

	CURRENT MONTH  ACTUAL	CUMULATIVE FILING TO DATE
BREAKDOWN OF "OTHER CATEGORY"		
OTHER COSTS		0
	33.37.0	0
Total Other Costs OTHER OPERATING EXPENSES	0	0
See Attached Schedule B- Schedule B includes all expenses- see column "other"	1,888,048	5,847,663
	1,888,048	5,847,663
Total Other Operating Expenses OTHER INCOME		
Interest on Checking Account	80	2,452
	80	2,452
Total Other Income OTHER EXPENSES		
Foundation Expenses	5,519	20,466
	5,519	20,466
Total Other Expenses OTHER REORGANIZATION EXPENSES	3,312	20,100
Total Reorganization Expenses	1	)  (

Reorganization Items - Interest Earned on Accumulated Cash from Chapter 11:

Interest earned on cash accumulated during the chapter 11 case, which would not have been earned but for the bankruptcy proceeding, should be reported as a reorganization item.

FORM MOR-2 (CON'T)

In re	Hudson Healthcare Inc					-
	Debtor					

Case No. 11-33014(DHS)

Reporting Period: 10/1 -10/31/2011

#### **BALANCE SHEET**

The Balance Sheet is to be completed on an accrual basis only. Pre-petition liabilities must be classified separately from postpetition obligations.

CURRENT ASSETS	BOOK VALUE AT END OF CURRENT REPORTING MONTH (10/31/2011)	BOOK VALUE ON PETITION DATE (8/1/2011)
Unrestricted Cash and Equivalents	\$ 294,228	\$ 1,050,773
Restricted Cash and Cash Equivalents (see continuation Sheet)		
Accounts Receivable (Net)		
Notes Receivable		
Inventories		
Prepaid Expenses		
Professional Retainers		26 (72 26)
Other Current Assets (attach schedule)	37,659,618	36,673,360
TOTAL CURRENT ASSETS	37,953,846	37,724,133
PROPERTY AND EQUIPMENT		
Real Property and Improvements		
Machinery and Equipment		
Furniture, Fixtures and Office Equipment		
Leasehold Improvements		24.000
Vehicles	24,000	24,000
Less Accumulated Depreciation		24.000
TOTAL PROPERTY & EQUIPMENT	24,000	24,000
OTHER ASSETS		
Loans to Insiders*		
Other Assets (attach schedule)		0.000
TOTAL OTHER ASSETS		2,882
TOTAL ASSETS	37,977,846	37,751,015

LIABILITIES AND OWNER EQUITY	BOOK VALUE AT END OF CURRENT REPORTING MONTH (10/31/2011)	BOOK VALUE ON PETITION DATE (8/1/2011)
LIABILITIES NOT SUBJECT TO COMPROMISE (Postpetition)		
Accounts Payable - post petition	4,434,831	
Accounts Payable - pre-petition approved by the court	681,926	1,037,077
Taxes Payable (refer to FORM MOR-4)	291,416	
Wages Payable - post-petition	1,855,549	
Wages Payable - pre-petition approved by court**	2,812,495	6,467,832
Notes Payable		
Rent/Leases - Building/Equipment		
Secured Debt/Adequate Protection Payments		
Professional Fees*	1,083,942	41,956
Other Postpetition Liabilities (attach schedule)	314,751	
TOTAL POSTPETITION LIABILITIES	11,474,910	7,546,865
LIABILITIES SUBJECT TO COMPROMISE (Pre-Petition)		
Secured Debt		
Wages Payable		
Priority Debt (taxes)		1,112,251
Unsecured Debt (AP)	26,924,759	29,521,454
Amounts Due to Insiders*		20.620.505
TOTAL PRE-PETITION LIABILITIES	26,924,759	30,633,705
TOTAL LIABILITIES	38,399,670	38,180,570
OWNER EQUITY		
Capital Stock		
Additional Paid-In Capital		
Partners' Capital Account		
Owner's Equity Account		
Retained Earnings – Pre-Petition		
Retained Earnings – Postpetition		
Adjustments to Owner Equity (attach schedule)		
Postpetition Contributions (Distributions) (Draws) (attach schedule)		
NET OWNER EOUITY	(421,823)	(429,554)
TOTAL LIABILITIES AND OWNERS' EQUITY	37,977,847	<b>37,751,01</b> 5

<sup>\*&</sup>quot;Insider" is defined in 11 U.S.C. Section 101(31).

<sup>\*</sup> Trenk, DiPascuale includes pre-ppetition amount of \$41,956

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Case No.

Debtor

In re Hudson Healthcare Inc

**Reporting Period:** 10/1 -10/31/2011

#### **BALANCE SHEET - continuation sheet**

ASSETS	BOOK VALUE AT END OF CURRENT REPORTING MONTH (10/31/2011)	BOOK VALUE ON PETITION DATE (8/1/2011)
Other Current Assets  Amount due from Hoboken Municipal Hospital Authority  * Unfunded requisitions- disputed, contingent and unliquidated	37,659,618	36,673,360
TOTAL OTHER CURRENT ASSETS Other Assets	37,659,618	36,673,360
TOTAL OTHER ASSETS  LIABILITIES AND OWNER EQUITY	BOOK VALUE AT END OF CURRENT REPORTING MONTH (10/31/2011)	BOOK VALUE ON PETITION DATE (8/1/2011)
Accrued Other Benefit Expense Accrued Audit Expense Self Insurance 2009 Long Term Workers Comp Self Insurance 2010 Long Term Workers Comp Other Transit Payable Accrued Pension, 401k, and 403b	154,549 7,500 66,000 3,713 (1,730) 84,719	
TOTAL OTHER POSTPETITION LIABILITIES  Adjustments to Owner Equity  TOTAL ADJUSTMENTS TO OWNER EQUITY	314,751	
Postpetition Contributions (Distributions) (Draws)		
TOTAL POSTPETITION CONTRIBUTIONS (DISTRIBUTIONS) (DRAWS)		

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In re Hudson Healthcare Inc

Case No.

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Reporting Period

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#### STATUS OF POSTPETITION TAXES

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero. Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes. Attach photocopies of any tax returns filed during the reporting period.

	Beginning Tax Liability	Amount Withheld or Accrued	Ameunt Paid	Date Paid	Check No. Or EFT	Ending Tax Liability
Federal						
Withholding	345,753	674,091	1,019,844	10/3,17,31	EFT	-
FICA-Employee	131,511	253,411	384,922		EFT	-
FICA-Employer	177,368	341,398	518,766		EFT	-
Unemployment	-					
Income						
Other:						
Total Federal Taxes	654,632	1,268,900	1,923,532			-
State and Local						
Withholding	77,593	150,550	152,517	10/5, 10/19	EFT	75,626
Sales						
Excise					<b>_</b>	122.046
Unemployment	107,900	25,145	-			133,046
Real Property						
Personal Property					_	92.742
Other: Disability	69,481	13,262				82,743
Total State Local	254,974		152,517			291,415
Total Taxes	909,606	1,457,857	2,076,049	-		291,415

#### SUMMARY OF UNPAID POSTPETITION DEBTS

Attach aged listing of accounts payable.

		Number Days Past Due				
	Current	0-30	31-60	61-90	Over-90	Total
Accounts Payable	2,365,584	1,676,337	299,064	93,846		4,434,831
Accounts Payable - Prepetition approved by the court	378,534	276,803	26,364	225		681,926
Taxes Payable	291,416					291,416
Wages Payable	1,855,549					1,855,549
Accrued Sick Vacation Payable	2,812,495					2,812,495
Rent/Leases-Building						-
Rent/Leases-Equipment						-
Secured Debt/Adequate Protection Payments						1 000 040
Professional Fees	1,083,942					1,083,942
Amounts Due to Insiders*						- 04.510
Other: 401(K)403(b) Central Pension & Other Benefits	84,719					84,719
Other	230,032					230,032
Other: Customer Deposits						-
Total Postpetition Debts					<u> </u>	11,474,910

Explain how and when the Debtor intends to pay any past-du	due postpetition debts.

<sup>\*&</sup>quot;Insider" is defined in 11 U.S.C. Section 101(31).

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In re Hudson Healthcare Inc

Debtor

Case No. <u>11-33014(DHS)</u> Reporting Period 10/1 -10/31/2011

#### ACCOUNTS RECEIVABLE RECONCILIATION AND AGING

Accounts Receivable Reconciliation	Amount
Total Accounts Receivable at the beginning of the reporting period	
+ Amounts billed during the period	
- Discounts Taken	
- Amounts collected during the period	
Total Accounts Receivable at the end of the reporting period	-
	H0000000000000000000000000000000000000
Accounts Receivable Aging	Amount
0 - 30 days old	
31 – 60 days old	
61 – 90 days old	
91 – days old	
Total Accounts Receivable	-
Amounts considered uncollectible (Bad Debt)	
Accounts Receivable (Net)	-

### **DEBTOR QUESTIONNAIRE**

Mu	st be completed each month	Yes	No
	Have any assets been sold or transferred outside the normal course of business this reporting period? If yes, provide an explanation below		No
2	Have any funds been disbursed from any account other than a debtor in possession account this reporting period? If yes provide an explanation below.		No
3.	Have all postpetition tax returns been timely filed? If no, provide an explanation below.	Yes	
4	Are workers compensation, general liability and other necessary insurance coverages in effect? If no, provide an explanation below.	Yes	